

IMPROVEMENT PERMIT

011678

Name: (owner) Floyd Koeneke

☒ New Installation ☒ Septic Tank

Property Location: SR# Byrd Blvd

Repairs

☒ Nitrification Line

Victory Lane

Subdivision DAVID RAYMOND

Lot # 3

Tax ID #.

Quadrant #

Number of Bedrooms Proposed: 2 (14x70)

Lot Size: 18.39 Ac

Basement with Plumbing: ☐

Garage: ☐

Water Supply: ☒ Well ☐ Public

Community

Distance From Well: 100 ft.

Type of system: ☒ Conventional

☐ Other _____

Size of tank: Septic Tank: 1200 gallons

Pump Tank: _____ gallons

Subsurface
Drainage Field

No. of
ditches 3

exact length
of each ditch 110 ft.

width of
ditches 3 ft.

depth of
ditches 18 in. ^{max}

French Drain Required: _____ Linear feet

Date: 02-07-01

Signed: Jon West

Environmental Health Specialist

This permit is subject to revocation if site plans or intended use change.

STUB out Plumbing shallow

18 MAX Ditch Depth

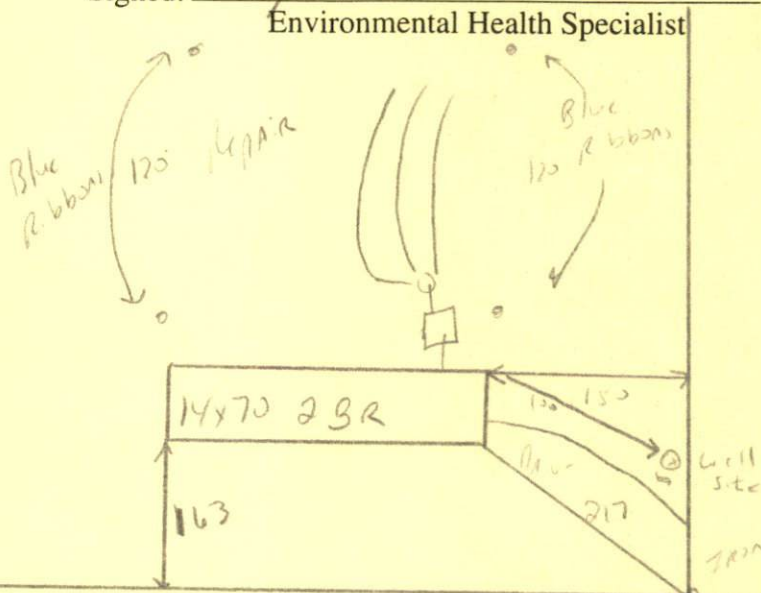
Follow contour

Maintain set Back,

Do not drive or park on
septic system

Limited to 230mm

Keep ~~back~~ 100' from Septic System
Well



ATA STOP

70 SR →

**HARNETT COUNTY HEALTH DEPARTMENT
AUTHORIZATION TO CONSTRUCT**

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 17603. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.

Owner or Authorized Agent Floyd Kivernick

Name: _____ Telephone # 910-893-2207

Address: _____

Property Location: SR # Byrd Road M Road Name _____

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision David Rayner Lot # 3

Number of Bedrooms Proposed: 2(14x7) Lot size: 18.39 Ac

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☒ Public ☐ Minimum Well Setback: 100 ft.

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 3 Length of lines 110

Width of ditches 3 ft. Depth of ditches 18 max inches

French Drain: Linear feet required _____ Depth of gravel _____

No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued.

Authorized Agent for Harnett County Health Department

Name: [Signature] Date: 02-07-01